

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

Instructions

- Print in ink or type. **#110**
- Complete form and return with ~~\$500~~ registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, La 70808 225-763-8777 or (800) 842-6830.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 01/25/05

Ren 2005
J# 847603
\$110.00W8

1050016

1. NAME Beckstrom Mark W
Last First MI

2. BUSINESS PHONE 504-842-3228
Area Code and Phone Number

3. BUSINESS ADDRESS 880 Commerce Rd. West Suite 500
Street and No.

New Orleans LA 70123
City State Zip

MAILING ADDRESS

Same
Street and No.
City State Zip

4. EMPLOYER Ochsner Clinic Foundation

5. EMPLOYER'S ADDRESS 1514 Jefferson Highway
Street and No.

New Orleans LA 70121
City State Zip

Certification of Accuracy

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Rob Sabota
Signature of Lobbyist



LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group and; (d) whether or not the client or someone else pays you to lobby.

Name Cochran Clinic Foundation

Address 1514 Jefferson Highway New Orleans LA 70121

Business or purpose Health Care Services, Graduate Medical Education and Biomedical Research

Does this person pay you? Y

If No, who pays you? _____